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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Α	Application or Docket Number 10/659,948			ing Date 10/2003	To be Mailed
. APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.18(a), (b), or (c))			N/A		N/A			N/A			N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))				N/A		N/A			N/A	·		N/A	
EXAMINATION FEE (37 CFR 1.18(o), (p), or (g))				N/A		N/A			N/A			N/A	
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•			x \$ =		OR ·	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))				minus 3 =		•			X \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE	sheet is \$25 additi	s of pape 50 (\$125 onal 50 s	er, the a for sma sheets o	pplication li entity) r fraction	drawings exceed 100 plication size fee due entity) for each fraction thereof. See and 37 CFR 1.16(s).					,	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(J))													
- 11	* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL	
APPLICATION AS AMENDED PART II (Column 1) (Column 2) (Column 3)									SMALL ENTITY OR			OTHER THAN SMALL ENTITY	
AMENDMENT	02/01/2007	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	· 10		Minus	 21		= 0		x \$ =		OR	X \$50=	0
	Independent (37 CFR 1.18(h))	- 4		Minus	···7		= 0		X\$ =		OR	X \$200=	0
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))										OR		
									TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIM REMAIN AFTE AMENDM	ING R		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	· /0		Minus	"	2/	=		X \$ =		OR	X \$ =	
	Independent (37 CFR 1.18(h))	. 6	7	Minus	***	7	=	\vdash	X \$ =	,	OR	X \$ =	
EN I	Application Size Fee (37 CFR 1.16(s))										İ		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))										OR		
	(07.02.01)								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
** If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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